

3727



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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/960,069	
	Filing Date	September 21, 2001	
	First Named Inventor	Wendell D. Willingham et al.	
	Group Art Unit	3727	
	Confirmation No.	4390	
Total Number of Pages in This Submission	6	Attorney Docket Number	17666USA/01215

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Transmittal of Substitute Declaration Substitute Declaration Return Postcard
Remarks: _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas A. Meehan, Esq. Emch, Schaffer, Schaub & Porcello Co., L.P.A.
Signature	<i>Thomas A. Meehan</i>
Date	April 1, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>4/1/02</u>			
Typed or printed name	Kathy A. Hower		
Signature	<i>Kathy A. Hower</i>	Date	<u>4/1/02</u>

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17666USA/01215

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

Wendell D. Willingham et al.      Exr.  
Serial No: 09/960,069      Art Unit: 3727  
Filed: September 21, 2001      Confirmation No.: 4390  
For: CLOSURE WITH GAS-BARRIER LINER  
AND PACKAGE INCORPORATING SAME

Commissioner of Patents  
and Trademarks  
Washington, D.C. 20231

March 29, 2002

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Transmittal Of Substitute Declaration

Sir:

Pursuant to MPEP §602.02, applicants are enclosing a Substitute Declaration for filing in this application.

The original Declaration erroneously identified the citizenship of Rodney M. Druitt, one of the joint inventors, as United Kingdom, whereas Mr. Druitt, though he resides in the United Kingdom, is a citizen of Australia.

The enclosed Substitute Declaration, which has been signed only by Mr. Druitt, correctly identifies his citizenship as "Australian"; the enclosed Substitute Declaration makes no other changes with respect to the identity of Mr. Druitt.

It is respectfully submitted, under MPEP §602.02, that the enclosed Substitute Declaration may be "taken together" with the original Declaration in

this application to "give all the required data," and that "no further oath or declaration is required."

Respectfully submitted,

---

*Thomas A. Meehan*

Thomas A. Meehan

Reg. No. 19,713

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Please type a plus sign (+) inside this box ☐



PTO/SB/01 (12-97)  
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**SUBSTITUTE  
DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

UNDER MPEP 602.02

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	17666 USA
First Named Inventor	Wendell D. Willingham
<b>COMPLETE IF KNOWN</b>	
Application Number	09 09 / 960,069
Filing Date	September 21, 2001
Group Art Unit	3727
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Closure With Gas-Barrier Liner And Package Incorporating Same

the specification of which

(Title of the invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 09/21/2001

as United States Application Number or PCT International

Application Number 09/960,069 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 385(b) of any foreign application(s) for patent or inventor's certificate, or 385(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	H. G. Bruss 25-LDP				
Address	Owens-Illinois, Inc.				
Address	One SeaGate				
City	Toledo	State	OH	ZIP	43666
Country	USA	Telephone	419-247-8547	Fax	419-247-8555

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Wendell D.

Willingham

Inventor's Signature					Date		
Residence: City	Perrysburg	State	OH	Country	USA	Citizenship	USA
Post Office Address	24380 Sun-Air Boulevard						
Post Office Address	24380 Sun-Air Boulevard						
City	Perrysburg	State	OH	ZIP	43551	Country	USA

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box →

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APR 11 2002



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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page \_\_\_ of \_\_\_

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Rodney M.

Druitt

Inventor's  
Signature

*Rodney M. Druitt*

12/3/02  
Date

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Citizenship

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State

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B80 7A1

Country

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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's  
Signature

Date

Residence: City

State

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